# School of Health Science, YCMOU, Nashik.

## Notification for MPH (Master of Public Health) (2 Yrs.Duration)

## Provisional Admission for 2018-19.

School of Health Sciences, would like to inform you that ,The provisional admission procedure of MPH (Master of Public Health) for the academic year 2018-19 will start from **11th June 2018 to 30th June 2018**. Applicant is expected to submit the **Provisional Admission** form (**Syllabus** for Entrance) attached herewith, for Admission process before **30th June 2018** .

The Applicant must also submit advance copy of complete form & requisite fees details **(Scan copy of Application form & DD of Rs 1000/-)** by email primarily on dir_hsc@ycmou.digitaluniversity.ac or abpatilycmou26@gmail.com last up to **30th June 2018.**

1. The original application form, DD and attested photocopies of qualification should reach by Speed Post or by hand to the **Director, School of Health Sciences, Dyangangotri near Gangapur Damp, Gangapur Nashik 422222. last up to 30th June 2018.**

2. The applicant should pay fees Rs 1000/-by D.D. drawn only on nationalized bank in favour of The Finance Officer, YCMOU,Nashik payable at Nashik.

3. Depending on the response & number of applications received,the decision for conducting the Entrance Examination (the tentative date being **15th of July 2018**) which will be confirmed & displayed on university web site.

4. The applicant will have to follow the instructions as per given notification and submit the Hard Copy of Application form, Eligibility documents (XEROX copy of Registration Certificate, Degree Certificate, all Marklist from 10th/12th /Degree, Cast Certificate Validity, with the Completed **Provisional Admission** form and Original D.D. to reach by hand or by post on or before **30th June 2018,** to **The Director, School of Health Sciences**. **Dnyangangotri,near Gangapur Dam, Gangapur, NASHIK** .
   (All Original Documents will be verified during the personal interview, if selected in the final merit list.)

5. Applications received after **30th June 2018** will not be accepted.

**Dr. Jaydeep Nikam**

**Director,**
**School of Health Science**
**Dyangangotri, near Gangapur Dam, Gangapur .Nashik 422222**
**Phone No. 0253-2230718**
dir_hsc@ycmou.digitaluniversity.ac

For any inquiry please contact:

**MPH, PROGRAM CO –ORDINATOR** :
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# यशवंतराव चव्हाण महाराष्ट्र मुक्त विद्यापीठ, नाशिक
## Yashwantrao Chavan Maharashtra Open University
Dnyangangotri, Nashik 422 222, MS, India

**Form No:**

Please paste a passport size (35 mm X 45 mm) Photograph here. Do NOT staple. Photo should not exceed the borders.

येथे पासपोर्ट साईजचा (३५ X ४५ मी.मी.) फोटो चिकटवावा, स्टेपल करू नये. फोटो चौकटीच्या बाहेर जाऊ नये.

| | | |
|---|---|---|
| **Programme Name** (विद्यावाचस्पती नाव ): | **Programme Code** विद्यावाचस्पती संकेतांक: | **Medium of Programme** (शिक्षणमाध्यम ): ☐ English ☐ Marathi ☐ Hindi ☐ If Other, Specify |
| **Year** (वर्ष)(प्रथम/द्वितीय/तृतीय): | **Semester** (सत्र): | |
| **Study Centre Name** (अभ्यासकेंद्राचे नाव): | **Study Centre Code** (अभ्यासकेंद्र संकेतांक): | **Payment Date:** |
| **Bank of Maharashtra Challan No:** | **Amount in Rs.:** | **Bank Transaction No:** |

**For study centre use only (फक्त अभ्यासकेंद्रासाठी ) →** **Documents Verified by Study Centre and Eligible for Admission:** ☐ Yes ☐ No

**Important Instructions for students** (विद्यार्थ्यांसाठी महत्त्वाच्या सूचना):

a. Read prospectus carefully before filling the admission form. (प्रवेश अर्ज भरण्यापूर्वी माहितीपुस्तिका काळजीपूर्वक वाचावी)

b. Use **black** ink ballpen to fill the form. No overwriting. (अर्ज काळ्या शाईच्या बॉलपेननेच भरावा. खाडाखोड करू नये)

c. Fill in all fields in **CAPITAL English** letters only. (अर्ज सरलात **कॅपिटल इंग्रजी** अक्षरांमध्येच भरणा करावा)

d. **All the information in this form is compulsory and Study Centre should verify that this form is completely filled by the student.**

e. Mark ☒ in appropriate box. (योग्य त्या चौकोनात ☒ अशी खूण करावी.)

**16 digit PAN, if already given (१६ अंकी कायम नोंदणी क्रमांक (पूर्वी दिलेला असल्यास):**

† Student should sign strictly inside this box only with black ink
विद्यार्थ्यांनी वरील चौकटीच्या आतच काळ्या शाईने स्वाक्षरी करावी

## 1. Personal Information Section (वैयक्तिक माहिती)

| | *Last Name (आडनाव)* | *First Name (पहिले नाव)* | *Father's/Husband's Name (वडिलांचे/पतीचे नाव)* | *Mother's Name (आईचे नाव)* |
|---|---|---|---|---|
| **Name of the Student (in English):** | | | | |
| विद्यार्थ्याचे नाव (मराठीमध्ये): | | | | |
| **Name of the Student as printed on Leaving or 10th std. certificate** (१० वी किंवा शाळेच्या प्रमाणपत्रावर असलेले नाव) | | | | |

**Marital Status** वैवाहिक स्थिती : ☐ Unmarried अविवाहित ☐ Married विवाहित ☐ Divorced घटस्फोटित ☐ Widowed विधवा/विधुर ☐ Deserted परित्यक्ता

**Date of Birth** जन्मतारीख : D D M M Y Y Y Y **Gender** लिंग: ☐Male पुरुष ☐Female स्त्री **Mother tongue** मातृभाषा:

**Place of Birth** जन्माचे ठिकाण: **Blood Group** (with Rh) रक्तगट: **Religion** धर्म : **Nationality** राष्ट्रीयत्व:

**Student's location Category** रहिवासाचे क्षेत्र: ☐ Rural ग्रामीण ☐ Urban शहरी ☐ Tribal आदिवासी

**Employment Status:** ☐ Employed ☐ Unemployed
**If Employed:** ☐ Service (नोकरी) ☐ Business (धंदा) ☐ Profession (व्यवसाय) ☐ Other इतर

Occupation हुद्दा/काम :
Work Experience in Years व्यावसायिक अनुभव:
Gap in education in Years शिक्षणातील खंड:

Your Annual Income (Rs.) (last financial year) वार्षिक आर्थिक वर्षाचे उत्पन्न रुपयांत:

**Address and Contact Details for Correspondence** संपर्कासाठी पत्ता:

**PIN** पिन:

**Country:** **State** राज्य: **District** जिल्हा: **Tehsil** तालुका: **City/Town/Village** शहर/गाव/पेठ :

Phone STD Code दूरध्वनी एसटीडी: Phone No. दूरध्वनी क्रमांक: **Mobile number** भ्रमणध्वनी क्र.: **Email ID** ई-मेल :

**Only for N.R.I./ Foreign Student →** **Name of Country (Nationality):** **Sponsoring Agency:** ☐ Private ☐ Govt ☐ Other

**Passport No:** **Validity upto:** **Type of Visa:** **Validity upto:** **Residential Permit No:** **Date:** **Police Verification:** ☐ Yes ☐ No Enclosed docs

## 2. Legal Reservation Category Information Section (जातीच्या प्रवर्गाची माहिती)

**Domicile of State** रहिवासी (राज्य) : **Category** जातीचा प्रवर्ग: ☐ Open खुला ☐ Reserved आरक्षित

**If Reserved** (आरक्षित असल्यास): ☐ SC ☐ ST ☐ DT(A) ☐ NT(B) ☐ NT(C) ☐ NT(D) ☐ OBC ☐ SBC

**Caste** जात: **Sub-Caste** उपजात:

**Whether belong to Minority Category:** ☐ Yes ☐ No **If Yes which:** ☐ Muslim ☐ Jain ☐ Christian ☐ Sikh ☐ Parsi ☐ Nav-Baudh

**If Physically Challenged** शारीरिक अपंगत्व ☐ Visually Impaired दृष्टिदोष ☐ Speech Impaired मूकबधिर ☐ Hearing Impaired कर्णबधिर ☐ Mentally Retarded मतिमंद ☐ Orthopedic Disorder विकलांग Percentage of Disability अपंगत्वाचे प्रमाण% : **Enclosed documents**

## 3. Social Reservation Information Section (सामाजिक आरक्षण प्रवर्गाची माहिती)

| | | | |
|---|---|---|---|
| ☐ Ex-Serviceman माजी सैनिक | ☐ Member of Project Affected Family प्रकल्पग्रस्त | ☐ WPD विधवा/ परित्यक्ता | ☐ Prisoner बंदीजन |
| ☐ Active-Serviceman आजी सैनिक | ☐ Member of Earthquake Affected Family भूकंपग्रस्त | ☐ Freedom Fighter स्वातंत्र्य सैनिक | |

## 4. Other Information (इतर माहिती)

| | | |
|---|---|---|
| ☐ University Employee/ 's Children | ☐ Artist Person | ☐ Sports Person played at College/ District/ State/ National/ International level |

## 5. Guardian Information Section (पालकाबद्दल माहिती)

| | |
|---|---|
| **Guardian's Name** पालकाचे नाव: | Annual Income of the Guardian (Rs.) (last financial year) पालकाचे मागील आर्थिक वर्षाचे उत्पन्न रुपयांत: |
| **Occupation of the Guardian** पालकाचा व्यवसाय/काम : Service नोकरी / Business धंदा / Profession व्यवसाय / Farming Farmer शेती / Laborer मजुरी / Retired निवृत्त / Other इतर | |
| **Relationship of guardian with applicant** पालकाशी नाते: | **Phone No.** पालकाचा दूरध्वनी क्र.: |

## 6. Educational Details Section (शैक्षणिक माहिती)

[Write 'YES' in the last column, against the qualifying examination, on the basis of which you are seeking admission to the said course. Write 'NO' in front of other examinations]
[ज्या आधारे तुम्ही परीक्षेसाठीचा प्रवेश मागता त्यासमोर 'Yes' लिहावे] **Please Note: 10th Details are mandatory if passed. इ. १० वी परीक्षा उत्तीर्ण असल्यास माहिती आवश्यक आहे**

**Last College Attended** शेवटचे कॉलेज/शाळा: Year वर्ष: **Roll No.:**

| Name of Examination परीक्षा | Name of Board /University मंडळ/विद्यापीठ | Name of School/College शाळा/कॉलेज | Date of Passing (DD/MM/YYYY) उत्तीर्ण दिनांक | Examination Seat No. (Last) परीक्षा आसन क्र. | Degree / Passing Certificate No. प्रमाणपत्र / पदवी क्र. | Marks Obtained मिळालेले गुण | Out of एकूण |
|---|---|---|---|---|---|---|---|
| Less than 10th इ. १० वी पेक्षा कमी | | | | | | | |
| Std 10th (इ. १० वी) Pass/Fail | | | | | | | |
| Std 12th (इ. १२ वी) Pass/Fail | | | | | | | |
| Diploma (पदविका) | | | | | | | |
| Degree (पदवी) | | | | | | | |
| PG Degree पदव्युत्तर पदवी | | | | | | | |
| YCMOU Preparatory/ Other (इतर) | | | | | | | |
| YCMOU Qualifying/ Entrance/ Aptitude Test Details (मुक्त विद्यापीठ परीक्षा माहिती) | | | | | | | |

## 7. Course Codes (अभ्यासक्रम संकेतांक)

| | |
|---|---|
| 1. | 9. |
| 2. | 10. |
| 3. | 11. |
| 4. | 12. |
| 5. | 13. |
| 6. | 14. |
| 7. | 15. |
| 8. | 16. |

## 8. Enclosures सोबत जोडलेली कागदपत्रे:

| | | |
|---|---|---|
| 1. | 4. | 7. |
| 2. | 5. | 8. |
| 3. | 6. | 9. |

## 9. Declaration by Student विद्यार्थ्याने दिलेली हमी

मी वर्ष वगैरे करतो की, प्रवेशासंबंधीचे माहितीपुस्तिकेतील नियम मी वाचले आहेत, प्रवेश अंतीम असल्याची माहिती पूर्णपणे खरी असून कागदपत्रे जोडलेली आहेत,**अंतिम प्रवेश मुख्यालयातून निश्चित केला जाईल, तसेच भरलेले शुल्क परत किंवा पुढे येते जमार नाही, याची मला जाणीव आहे.** विद्यापीठाने वेळोवेळी प्रवेशासंबंधाने निर्णय व त्यात वेळोवेळी झालेले बदल मला बंधनकारक राहतील, याही आपण मला प्रवेश द्यावा ही विनंती.

I hereby declare that, I have read the rules related to admission as given in the prospectus; and that the information furnished by me is true and complete to the best of my knowledge. **I am aware that my admission will be finalized by the University headquarters and that the admission fee will not be returned or transferred to next year in any case.** I further agree that the decision taken by the University and any change made in the rules regarding admission from time to time will be binding on me.

**Sign and seal of study centre** (अभ्यासकेंद्राचा शिक्का व स्वाक्षरी)

**Place** ठिकाण:

**Date** दिनांक: **Signature of the student** विद्यार्थ्याची स्वाक्षरी:

**Note:** Student **MUST** retain photocopy of completely filled in admission form (both pages) for future reference. Available information in this form will be required to activate his/her account on http://ycmou.digitaluniversity.ac portal. पूर्ण भरलेल्या अर्जाची (दोन्ही बाजू) एक छत्र विद्यार्थ्याने **स्वताकडे ठेवणे आवश्यक** आहे. ह्या अर्जावरील माहितीच्या आधारेच 'ई-सुविधा' संकेतस्थळ http://ycmou.digitaluniversity.ac वर ॲक्टिवेट करता येईल.

# Syllabus of MPH Entrance Exam, 2018-19

## General Knowledge

## General Aptitude

- Tests of Comprehension
- Analysis Reasoning

## Public Health

- preventive and Social Medicine by park and park
- Social Sciences and Health
- National Health
- Nutrition-Deficiency Conditions Including Micro-Nutrient Malnutrition
- Policy and National Health Programmes
- Screening for Diseases
- Hospital-Acquired Infections
- Health Planning and Management
- Environment and Health
- Communicable and Non-Communicable Diseases
- Concept of Health and Disease
- Demography and Family Welfare
- Disaster Management
- Biostatistics

## Allied Health Sciences

- SARS and Tuberculosis
- Vaccine-Preventable Diseases
- Vector Bionomics & Ecology and Bioenvironmental Vector Control
- Zoonosis
- Public Health Laboratory
- Nutrition and Metabolism
- Molecular Diagnosis
- Laboratory Aspects of Water-Borne and Vector-Borne Diseases
- Immunology
- Arthropods of Public Health Importance
- Basic Genetics
- Chemical and Bacteriological Quality of Water
- Clinical Biochemistry
- Fluorosis and Arsenicosis
- Acute Respiratory Infections Including Influenza